

May 12, 2006

DHS HCO 06-6398

Mr. Jerry D. Stanger, Chief
California Department of Health Services
Payment Systems Division
MS 4700
P.O. Box 997413
Sacramento, CA 95899-7413

**APPROVED EMERGENCY DISENROLLMENTS BY REASON AND PLAN, Medical
and Dental — Effective 5/1/06**

EXEMPTIONS SUMMARY, Medical and Dental — Effective 5/1/06

Reference: CA HCO Contract #01-15932 Section 3.10.5.2.3 (7)
DHS-HCO #02-1633
H #0802-0650

Dear Mr. Stanger:

The purpose of this letter is to provide Department of Health Services with the reports listed below.

- ☐ MSC-B-M27 – Approved Emergency Disenrollments by Reason and Plan – Medical
- ☐ MSC-B-M27D – Approved Emergency Disenrollments by Reason and Plan – Dental
- ☐ MSC-B-M29 – Medical Exemptions Summary
- ☐ MSC-B-M29D – Dental Exemptions Summary

If you have any questions regarding this report, please contact Harry Gill at (916) 364-6620.

Sincerely,

Signature on Original Copy

Benjamin R. Coss
Project Director
California Health Care Options

cc: Reports File
Admin File – ID #1235

Data Provision Disclaimer

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MSC-B-M27 APPROVED EMERGENCY DISENROLLMENTS BY REASON AND PLAN
ALL ACCEPTED MEDICAL EDERS
 From 3/25/2006 - 4/24/2006

MAXIMUS

2 PLAN & GMC COUNTIES																												
COUNTY	PLAN NAME	REASONS																										
		E01	E02	E03	E04	E05	E06	E07	E08	E09	E10	E11	E12	E13	I01	F01	F02	F03	F04	F05	F06	F09	F10	X01	X03	X04	TOTAL	
ALAMEDA	ALAMEDA ALLIANCE	0	0	0	0	19	2	0	0	7	0	0	65	2	12	0	0	0	0	0	0	0	0	0	0	0	2	109
	BLUE CROSS	0	1	0	0	12	1	0	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	16	
	COUNTY TOTAL	0	1	0	0	31	3	0	0	8	0	0	65	3	12	0	0	0	0	0	0	0	0	0	0	0	2	125
CONTRA COSTA	BLUE CROSS	0	2	0	0	0	7	0	0	0	0	0	3	3	0	0	0	0	0	0	0	0	0	0	0	0	1	16
	CONTRA COSTA HEALTH	0	0	0	0	0	0	0	0	4	0	0	35	0	1	0	0	0	0	0	0	0	2	0	0	0	42	
	COUNTY TOTAL	0	2	0	0	0	7	0	0	4	0	0	38	3	1	0	0	0	0	0	0	0	2	0	0	1	58	
FRESNO	BLUE CROSS	0	2	0	0	0	29	0	0	0	0	2	23	0	1	0	0	0	0	0	0	0	0	0	0	0	57	
	HEALTH NET	0	0	0	0	0	6	1	0	0	0	0	18	0	7	0	0	0	0	0	0	0	0	0	0	0	32	
	COUNTY TOTAL	0	2	0	0	0	35	1	0	0	0	2	41	0	8	0	0	0	0	0	0	0	0	0	0	0	89	
KERN	HEALTH NET	0	1	0	0	0	15	0	0	0	0	0	30	3	0	0	0	0	0	0	0	0	0	0	0	0	49	
	KERN FAMILY HEALTH	2	3	0	0	0	39	0	0	0	1	4	93	0	0	0	0	0	0	0	0	0	0	0	0	0	142	
	COUNTY TOTAL	2	4	0	0	0	54	0	0	0	1	4	123	3	0	0	0	0	0	0	0	0	0	0	0	0	191	
LOS ANGELES	HEALTH NET	2	11	0	0	0	192	0	0	13	0	4	369	63	145	0	0	0	0	0	0	0	0	0	0	14	813	
	LA CARE	0	8	1	0	0	289	1	1	6	0	7	195	49	83	0	0	0	0	0	0	0	0	0	0	10	650	
	COUNTY TOTAL	2	19	1	0	0	481	1	1	19	0	11	564	112	228	0	0	0	0	0	0	0	0	0	0	24	1,463	
RIVERSIDE	INLAND EMPIRE HEALTH	1	2	0	0	0	22	0	0	4	0	0	78	1	7	0	0	0	0	0	0	0	0	0	0	1	116	
	MOLINA	0	1	0	0	0	39	0	0	0	0	0	15	1	0	0	0	0	0	0	0	0	0	0	0	1	57	
	COUNTY TOTAL	1	3	0	0	0	61	0	0	4	0	0	93	2	7	0	0	0	0	0	0	0	0	0	0	2	173	
SACRAMENTO	BLUE CROSS (190 PLAN)	0	2	0	0	0	41	0	0	0	0	2	25	2	2	0	0	0	0	0	0	0	0	0	0	1	75	
	CARE FIRST	0	0	0	0	0	4	0	0	0	0	0	1	2	0	0	0	0	0	0	0	0	0	0	0	0	7	
	HEALTH NET	0	1	0	0	0	28	1	0	2	0	0	27	0	3	0	0	0	0	0	0	0	0	0	0	1	63	
	KAISER	0	2	0	0	0	2	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	5	
	MOLINA	0	2	0	0	0	16	1	0	0	0	2	24	2	0	0	0	0	0	0	0	0	0	0	0	0	47	
	WESTERN ADVANTAGE	0	1	0	0	0	15	0	0	0	0	0	7	3	2	0	0	0	0	0	0	0	0	0	0	0	28	
	COUNTY TOTAL	0	8	0	0	0	106	2	0	2	0	4	84	10	7	0	0	0	0	0	0	0	0	0	0	2	225	
SAN BERNARDINO	INLAND EMPIRE	1	4	0	0	0	46	0	0	4	0	1	76	6	4	0	0	0	0	0	0	0	0	0	0	2	144	
	MOLINA	0	1	0	0	1	14	0	0	1	0	0	29	8	2	0	0	0	0	0	0	0	0	0	0	1	57	
	COUNTY TOTAL	1	5	0	0	1	60	0	0	5	0	1	105	14	6	0	0	0	0	0	0	0	0	0	0	3	201	
SAN DIEGO	BLUE CROSS	0	3	0	0	0	14	0	0	0	0	0	2	1	1	0	0	0	0	0	0	0	0	0	0	0	21	
	CARE FIRST	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	
	COMMUNITY HEALTH	0	5	0	0	0	23	0	0	0	0	0	8	0	0	0	0	0	0	0	0	0	0	0	0	0	36	
	HEALTH NET	0	3	0	0	0	6	1	0	2	0	1	18	8	8	0	0	0	0	0	0	0	0	0	0	2	49	
	KAISER	0	0	0	0	0	4	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	5	
	MOLINA	0	1	0	0	0	24	0	0	1	0	4	15	0	0	0	0	0	0	0	0	0	0	0	0	2	47	
	COUNTY TOTAL	0	12	0	0	0	73	1	0	3	0	5	43	9	10	0	0	0	0	0	0	0	0	0	0	4	160	
SAN FRANCISCO	BLUE CROSS	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	
	SAN FRANCISCO HLTH	0	1	0	0	0	2	0	0	0	0	0	19	0	0	0	0	0	0	0	0	0	0	0	0	0	22	
	COUNTY TOTAL	0	1	0	0	0	2	0	0	0	0	0	20	0	0	0	0	0	0	0	0	0	0	0	0	0	23	
SAN JOAQUIN	BLUE CROSS	0	1	0	0	7	0	0	0	0	0	0	9	1	1	0	0	0	0	0	0	0	0	0	0	0	19	
	SAN JOAQUIN HEALTH	0	0	0	0	26	1	0	0	0	0	0	17	1	2	0	0	0	0	0	0	0	0	0	0	0	47	
	COUNTY TOTAL	0	1	0	0	33	1	0	0	0	0	0	26	2	3	0	0	0	0	0	0	0	0	0	0	0	66	
SANTA CLARA	BLUE CROSS	0	0	0	0	0	7	0	0	0	0	0	3	4	0	0	0	0	0	0	0	0	0	0	0	0	14	
	SANTA CLARA FAMILY	0	1	0	0	0	17	0	0	3	0	1	55	0	1	0	0	0	0	0	0	0	0	0	0	0	78	
	COUNTY TOTAL	0	1	0	0	0	24	0	0	3	0	1	58	4	1	0	0	0	0	0	0	0	0	0	0	0	92	
STANISLAUS	BLUE CROSS (310 PLAN)	0	0	0	0	0	4	0	0	0	0	1	23	1	0	0	0	0	0	0	0	0	0	0	0	0	29	
	HEALTH NET	0	1	0	0	0	0	0	0	0	0	0	25	2	1	0	0	0	0	0	0	0	0	0	0	0	29	
	COUNTY TOTAL	0	1	0	0	0	4	0	0	0	0	1	48	3	1	0	0	0	0	0	0	0	0	0	0	0	58	
TULARE	BLUE CROSS	0	1	0	0	0	13	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	15	
	HEALTH NET	0	0	0	0	0	4	0	0	0	0	0	15	0	4	0	0	0	0	0	0	0	0	0	0	0	23	
	COUNTY TOTAL	0	1	0	0	0	17	0	0	1	0	0	15	0	4	0	0	0	0	0	0	0	0	0	0	0	38	
2 PLAN & GMC COUNTY TOTAL		6	61	1	0	65	928	5	1	49	1	29	1,323	165	288	0	0	0	0	0	0	0	2	0	0	38	2,962	

MSC-B-M27 APPROVED EMERGENCY DISENROLLMENTS BY REASON AND PLAN
ALL ACCEPTED MEDICAL EDERS
From 3/25/2006 - 4/24/2006

MAXIMUS

VOLUNTARY COUNTIES																															
COUNTY	PLAN NAME	REASONS																													
		E01	E02	E03	E04	E05	E06	E07	E08	E09	E10	E11	E12	E13	I01	F01	F02	F03	F04	F05	F06	F09	F10	X01	X03	X04					
MARIN	KAISER	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				
SONOMA	KAISER	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				
VOLUNTARY COUNTY TOTAL		0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				
TOTAL		6	61	1	0	65	929	5	1	49	1	29	1,323	165	288	0	0	0	0	0	0	0	2	0	0	38	2,963				
REASON CODE																															
E01 = Incarcerated E02 = Prior Care E03 = Enrolled Incorrectly Into a Plan E04 = Deceased E05 = Child Protective Services E06 = Foster Care/Adoption E07 = Problem Using HCP											E08 = Terminated By Plan E09 = Long Term Care E10 = CCS Not in a PCCM Contract E11 = Other Health Coverage E12 = Moved Out of County E13 = Pregnancy I01 = System Created											F01 = Could Not Choose Dr F02 = HP Did Not Meet Needs/Bene Pref. F03 = Dr Did Not Meet Bene Needs F04 = Too Far To Go F05 = Did Not Choose Plan F06 = Moving Out of County F09 = Other Reason					F10 = No Reason Checked X01 = Waiver Program Exempt X03 = Indian Health Coverage X04 = Medical Exempt				

MSC-B-M27D APPROVED EMERGENCY DISENROLLMENTS BY REASON AND PLAN
ALL ACCEPTED MEDICAL EDERS
 From 3/25/2006 - 4/24/2006

MAXIMUS

GMC MANDATORY DENTAL COUNTIES																										
COUNTY	PLAN NAME	REASONS																								
		E01	E02	E03	E04	E05	E06	E07	E08	E09	E10	E11	E12	I01	F01	F02	F03	F04	F05	F06	F09	F10	X01	X02	X03	TOTAL
SACRAMENTO	ACCESS DENTAL	0	2	0	0	0	30	0	0	1	0	0	30	4	0	0	0	0	0	0	0	0	0	0	0	67
	COMMUNITY DENTAL	0	0	0	0	0	9	0	0	0	0	0	11	0	0	0	0	0	0	0	0	0	0	0	20	
	LIBERTY DENTAL	0	1	0	0	0	9	0	0	0	0	0	14	0	0	0	0	0	0	0	0	0	0	0	24	
	WESTERN DENTAL	0	1	0	0	0	59	0	0	0	0	0	27	1	0	0	0	0	0	0	0	0	0	0	88	
	COUNTY TOTAL	0	4	0	0	0	107	0	0	1	0	0	82	5	0	0	0	0	0	0	0	0	0	0	0	199
GMC MANDATORY COUNTIES TOTAL		0	4	0	0	0	107	0	0	1	0	0	82	5	0	0	0	0	0	0	0	0	0	0	0	199
VOLUNTARY DENTAL COUNTIES																										
COUNTY	PLAN NAME	REASONS																								
		E01	E02	E03	E04	E05	E06	E07	E08	E09	E10	E11	E12	I01	F01	F02	F03	F04	F05	F06	F09	F10	X01	X02	X03	TOTAL
LOS ANGELES	ACCESS DENTAL	0	0	0	0	0	21	0	0	0	0	0	19	8	0	0	0	0	0	0	0	0	0	0	0	48
	AMERICAN HEALTH	0	2	0	0	0	5	0	0	0	0	0	5	0	0	0	0	0	0	0	0	0	0	0	0	12
	COMMUNITY DENTAL	0	0	0	0	0	3	0	0	0	0	0	4	0	0	0	0	0	0	0	0	0	0	0	0	7
	LIBERTY DENTAL	0	0	0	0	0	1	0	0	0	0	0	4	0	0	0	0	0	0	0	0	0	0	0	0	5
	SAFEGUARD DENTAL	0	2	0	0	0	2	0	0	0	0	0	29	7	0	0	0	0	0	0	0	0	0	0	0	40
	UNITED HEALTH	0	0	0	0	0	3	0	0	1	0	0	6	1	0	0	0	0	0	0	0	0	0	0	0	11
	UNIVERSAL CARE	0	0	0	0	0	3	0	0	1	0	0	15	2	0	0	0	0	0	0	0	0	0	0	0	21
	WESTERN DENTAL	0	3	0	0	0	19	0	0	0	0	0	29	11	0	0	0	0	0	0	0	0	0	0	0	62
COUNTY TOTAL	0	7	0	0	0	57	0	0	2	0	0	111	29	0	0	0	0	0	0	0	0	0	0	0	206	
RIVERSIDE	SAFEGUARD DENTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	WESTERN DENTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	COUNTY TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SAN BERNARDINO	SAFEGUARD DENTAL	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
	UNITED HEALTH	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	WESTERN DENTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	COUNTY TOTAL	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
VOLUNTARY COUNTIES TOTAL		0	7	0	0	0	58	0	0	2	0	0	111	29	0	0	0	0	0	0	0	0	0	0	0	207
GRAND TOTAL		0	11	0	0	0	165	0	0	3	0	0	193	34	0	0	0	0	0	0	0	0	0	0	0	406
<div><div><div><div><div>REASON CODE</div><div>E01 = Incarcerated</div><div>E02 = Prior Care</div><div>E03 = Enrolled Incorrectly Into a Plan</div><div>E04 = Deceased</div><div>E05 = Child Protective Services</div><div>E06 = Foster Care/Adoption</div><div>E07 = Problem Using HCP</div></div><div>E08 = Terminated By Plan</div><div>E09 = Long Term Care</div><div>E10 = CCS Not in a PCCM Contract</div><div>E11 = Other Health Coverage</div><div>E12 = Moved Out of County</div><div>I01 = System Created</div><div>F01 = Could Not Choose Dr</div></div><div><div>F02 = HP Did Not Meet Needs/Bene Pref.</div><div>F03 = Dr Did Not Meet Bene Needs</div><div>F04 = Too Far To Go</div><div>F05 = Did Not Choose Plan</div><div>F06 = Moving Out of County</div><div>F09 = Other Reason</div><div>F10 = No Reason Checked</div></div><div><div>X01 = Waiver Program Exempt</div><div>X02 = Dental Exempt</div><div>X03 = Indian Health Coverage</div></div></div></div>																										

Effective 4/1/06, Health Net will acquire Universal Care (UC) to become a Dental Managed Care PHP in Los Angeles County per H# 0306-2226.

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MSC-B-M29 MEDICAL EXEMPTIONS SUMMARY

3/25/2006 - 4/24/2006

EFFECTIVE 5/1/2006

MAXIMUS

2 PLAN & GMC COUNTIES

COUNTY	PLAN NAME	REASONS													TOTAL
		A	B	C	D	E	F	G	M	P	U	V	W	Y	
ALAMEDA	ALAMEDA ALLIANCE	0	0	0	0	0	0	0	2	0	0	0	0	0	2
	BLUE CROSS	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	COUNTY TOTAL	0	0	0	0	0	0	0	2	0	0	0	0	0	2
CONTRA COSTA	BLUE CROSS	0	0	0	0	0	0	1	0	0	0	0	0	0	1
	CONTRA COSTA HEALTH	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	COUNTY TOTAL	0	0	0	0	0	0	1	0	0	0	0	0	0	1
FRESNO	BLUE CROSS	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	HEALTH NET	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	COUNTY TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0
KERN	HEALTH NET	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	KERN FAMILY HEALTH	0	0	0	0	0	0	0		0	0	0	0	0	0
	COUNTY TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0
LOS ANGELES	HEALTH NET	0	1	4	5	2	0	1	6	24	0	0	0	0	43
	LA CARE	0	1	8	4	2	2	0	6	22	0	0	0	0	45
	COUNTY TOTAL	0	2	12	9	4	2	1	12	46	0	0	0	0	88
RIVERSIDE	INLAND EMPIRE HEALTH	0	1	0	1	1	0	0	0	0	0	0	0	0	3
	MOLINA	0	0	0	0	2	0	0	0	1	0	0	0	0	3
	COUNTY TOTAL	0	1	0	1	3	0	0	0	1	0	0	0	0	6
SACRAMENTO	BLUE CROSS (190 PLAN)	0	0	0	0	0	0	1	0	1	0	0	0	0	2
	CARE FIRST	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	HEALTH NET	1	0	0	0	0	0	0	0	0	0	0	0	0	1
	KAISER	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	MOLINA	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	WESTERN ADVANTAGE	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	COUNTY TOTAL	1	0	0	0	0	0	1	0	1	0	0	0	0	3
SAN BERNARDINO	INLAND EMPIRE	1	0	1	0	0	0	1	0	4	0	0	0	0	7
	MOLINA	0	0	0	0	0	0	1	0	6	0	0	0	0	7
	COUNTY TOTAL	1	0	1	0	0	0	2	0	10	0	0	0	0	14
SAN DIEGO	BLUE CROSS	0	0	1	0	0	0	0	0	0	0	0	0	0	1
	CARE FIRST	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	COMMUNITY HEALTH	0	0	0	0	1	0	0	0	0	0	0	0	0	1
	HEALTH NET	0	0	0	1	0	0	1	0	2	0	0	0	0	4
	KAISER	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	MOLINA	0	0	2	0	0	0	1	0	1	0	0	0	0	4
	COUNTY TOTAL	0	0	3	1	1	0	2	0	3	0	0	0	0	10

MSC-B-M29 MEDICAL EXEMPTIONS SUMMARY

3/25/2006 - 4/24/2006

EFFECTIVE 5/1/2006

MAXIMUS

2 PLAN & GMC COUNTIES

COUNTY	PLAN NAME	REASONS													TOTAL
		A	B	C	D	E	F	G	M	P	U	V	W	Y	
SAN FRANCISCO	BLUE CROSS	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	SAN FRANCISCO HLTH	0	0	0	0	0	0	0	0	1	0	0	0	0	1
	COUNTY TOTAL	0	0	0	0	0	0	0	0	1	0	0	0	0	1
SAN JOAQUIN	BLUE CROSS	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	SAN JOAQUIN HEALTH	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	COUNTY TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SANTA CLARA	BLUE CROSS	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	SANTA CLARA FAMILY	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	COUNTY TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0
STANISLAUS	BLUE CROSS (310 PLAN)	1	0	0	0	0	0	0	0	0	0	0	0	0	1
	HEALTH NET	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	COUNTY TOTAL	1	0	0	0	0	0	0	0	0	0	0	0	0	1
TULARE	BLUE CROSS	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	HEALTH NET	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	COUNTY TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL		3	3	16	11	8	2	7	14	62	0	0	0	0	126

REASON CODE

A = Neurological Disorder
B = Hematological Disorder
C = Cancer Therapy
D = Renal Dialysis
E = Major Organ Transplant

F = HIV / AIDS
G = Awaiting Surgery or Treatment
M = Other Complex Medical Condition
P = Pregnant

U = Waiver - AIDS
V = Waiver - Model
W = Waiver - IHMC
Y = Waiver - SNF

MSC-B-M29D DENTAL EXEMPTIONS SUMMARY

3/25/2006 - 4/24/2006

EFFECTIVE 5/1/2006

MAXIMUS

2 PLAN & GMC COUNTIES								
COUNTY	PLAN NAME	REASONS						
		Regular Dental	Indian	Temp Exempt - Foster Care	Temp Exempt - Long Term Care	Temp Exempt - Moved Out of County	Other Dental	TOTAL
LOS ANGELES	ACCESS DENTAL	0	0	0	0	0	0	0
	AMERICAN HEALTH	0	0	0	0	0	0	0
	COMMUNITY DENTAL	0	0	0	0	0	0	0
	LIBERTY DENTAL	0	0	0	0	0	0	0
	SAFEGUARD DENTAL	0	0	0	0	0	0	0
	UNITED HEALTH PLAN	0	0	0	0	0	0	0
	UNIVERSAL CARE	0	0	0	0	0	0	0
	WESTERN DENTAL	0	0	0	0	0	0	0
	COUNTY TOTAL	0	0	0	0	0	0	0
RIVERSIDE	SAFEGUARD DENTAL	0	0	0	0	0	0	0
	WESTERN DENTAL	0	0	0	0	0	0	0
	COUNTY TOTAL	0	0	0	0	0	0	0
SACRAMENTO	ACCESS DENTAL	0	0	0	0	0	0	0
	COMMUNITY DENTAL	0	0	0	0	0	0	0
	LIBERTY DENTAL	0	0	0	0	0	0	0
	WESTERN DENTAL	0	0	0	0	0	0	0
	COUNTY TOTAL	0	0	0	0	0	0	0
SAN BERNARDINO	SAFEGUARD DENTAL	0	0	0	0	0	0	0
	UNITED HEALTH PLAN	0	0	0	0	0	0	0
	WESTERN DENTAL	0	0	0	0	0	0	0
	COUNTY TOTAL	0	0	0	0	0	0	0
TOTAL		0	0	0	0	0	0	0

Effective 4/1/06, Health Net will acquire Universal Care (UC) to become a Dental Managed Care PHP in Los Angeles County per H# 0306-2226.